

# 48 HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

<b>1. NAME OF COMMITTEE IN FULL</b> <div style="border: 1px solid black; padding: 2px;">Friends of Pete Gallego</div>			
<b>ADDRESS</b> (number and street) <div style="border: 1px solid black; padding: 2px;">PO Box 1781</div>			
<b>CITY, STATE, and ZIP CODE</b> <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">San Antonio</div> <div style="border: 1px solid black; padding: 2px;">TX</div> <div style="border: 1px solid black; padding: 2px;">78296</div> </div>			
<b>2. NAME OF CANDIDATE</b> <div style="border: 1px solid black; padding: 2px;">Mr. Pete Gallego</div>	<b>3. OFFICE SOUGHT</b> (State and District) <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">House</div> <div style="border: 1px solid black; padding: 2px;">TX</div> <div style="border: 1px solid black; padding: 2px;">23</div> </div>		<b>4. FEC IDENTIFICATION NUMBER</b> <div style="border: 1px solid black; padding: 2px;">C00501908</div>
<b>5. IS THIS AN AMENDMENT?</b> <input checked="" type="checkbox"/> NO, THIS IS A NEW FILING <input type="checkbox"/> YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____			

A. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount	
Dorothy A. Budd  4514 Cole Avenue Suite 1215  Dallas TX 75205	Not Employed	05/22/2012	2500.00	
	<b>Transaction ID : C2766907</b>			
	Occupation Homemaker			
B. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount	
Mr. Russell W. Budd  4514 Travis Street Suite 328  Dallas TX 75205	Baron & Budd, P.C.	05/22/2012	2500.00	
	<b>Transaction ID : C2766906</b>			
	Occupation Attorney			
C. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount	
	Occupation			
D. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount	
	Occupation			
E. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount	
	Occupation			

<b>SIGNATURE (optional)</b> <i>Mr. Manuel Pelez-Prada</i>  <div style="text-align: right;">[Electronically Filed]</div>	<b>DATE</b> 05/24/2012	<b>For further information contact:</b> Federal Election Commission 999 E Street, NW, Washington, DC 20463 Toll Free 800-424-9530, Local 202-694-1100
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Any information copied from reports and statements filed under the Federal Election Campaign Act may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes other than using the name and address of any political committee to solicit contributions from such committee.

## FEC FORM 6

(Revised 07/2011)